| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | PS | 66671 45 | 8/25 8/30/00 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | | | |
| RESPONSE FORMALITY REVIEW | | 296665 | 10-2-0 |

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| ✔ | ............................... Rejected | | N | ............................... Non-elected |
| = | ............................... Allowed | | I | ............................... Interference |
| — | (Through numeral)... Canceled | | A | ............................... Appeal |
| ÷ | ............................... Restricted | | O | ............................... Objected |

| Claim | Date | | Claim | Date | | Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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